In re Application of	Atty. Docket
ANTONIUS H.M. HOLTSLAG ET AL.	PHNL 000547
SERIAL NO.: 10/043,384	GROUP ART UNIT: 2673
FILED: October 26, 2001	EXAMINER: A. Mengistu

SUB-FIELD DRIVEN DISPLAY DEVICE AND METHOD

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

AUG 0 4 2004

Technology Center 2600

Sir:

RESPONSE UNDER 37 C.F.R. 1.111

This is in response to the Office Action mailed May 20, 2004, in which the Examiner rejected claims 1, 6-12, 14 and 15 under 35 U.S.C. 103(a) as being unpatentable over U.S Patent Publication No. 2003/0193449 A1 to Wakabayashi et al. in vie of European Patent Application No. EP0903718 to Hirakawa et al.; and claims 2-5 and 13 under 35 U.S.C. 103(a) as being unpatentable over Wakabayashi et al. in view of Hirakawa et al., and further in view of U.S. Patent 6,249,265 to Tajima et al.

Applicants traverse the above rejections and offer the following explanations.

The Wakabayashi et al. patent reference discloses a display and it's driving method, in which a sub-field driven

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

10/043384

(handwritten: 1/30/04)

CLAIMS AS AMENDED - PART II

OTHER THAN
SMALL ENTITY OR **SMALL ENTITY**

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
Total	* 15	Minus	** 20	=	X$ 9=		OR	X$18=	
Independent	* 2	Minus	*** 3	=	X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+140=		OR	+280=	
					TOTAL ADDIT FEE		OR	TOTAL ADDIT FEE	

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
Total	*	Minus	**	=	X$ =		OR	X$ =	
Independent	*	Minus	***	=	X =		OR	X =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+ =		OR	+ =	
					TOTAL ADDIT FEE		OR	TOTAL ADDIT FEE	

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
Total	*	Minus	**	=	X$ =		OR	X$ =	
Independent	*	Minus	***	=	X =		OR	X =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+ =		OR	+ =	
					TOTAL ADDIT FEE		OR	TOTAL ADDIT FEE	

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDI-TIONAL FEE		RATE	ADDI-TIONAL FEE
Total	*	Minus	**	=	X$ =		OR	X$ =	
Independent	*	Minus	***	=	X =		OR	X =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐					+ =		OR	+ =	
					TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

Application or Docket Number
10043384

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	*15*	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	*15* minus 20=	* *0*
INDEPENDENT CLAIMS	*2* minus 3 =	* *0*
MULTIPLE DEPENDENT CLAIM PRESENT		☐

SMALL ENTITY TYPE ☐ OR **OTHER THAN SMALL ENTITY**

RATE	FEE		RATE	FEE
BASIC FEE	370.00	OR	BASIC FEE	740.00
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	*740*

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* *15*	Minus	** *20*	=
Independent	* *2*	Minus	*** *3*	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

SMALL ENTITY OR **OTHER THAN SMALL ENTITY**

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* *15*	Minus	** *20*	=
Independent	* *2*	Minus	*** *3*	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* *15*	Minus	** *20*	=
Independent	* *2*	Minus	*** *3*	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				☐

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.